

Woodbridge

Typhoid Fever.

FIFTH PAPER.

5-15

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BY JOHN ELIOT WOODBRIDGE, M.D.

YOUNGSTOWN, OHIO.

MEMBER AND EX-PRESIDENT MAHONING COUNTY, OHIO, MEDICAL SOCIETY;
MEMBER AND EX-VICE-PRESIDENT OHIO STATE MEDICAL SOCIETY;
MEMBER MISSISSIPPI VALLEY MEDICAL ASSOCIATION; MEM-
BER NINTH INTERNATIONAL MEDICAL CONGRESS;
MEMBER AND TRUSTEE AMERICAN MED-
ICAL ASSOCIATION, ETC., ETC.

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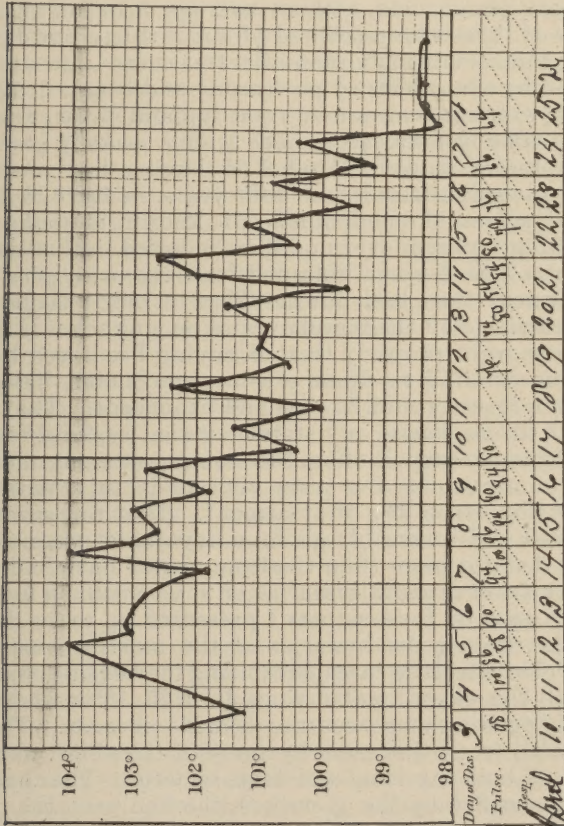
TYPHOID FEVER.

It was my intention to have made in this paper an effort to discuss from the scientist's standpoint the etiology and treatment of typhoid fever, but the positive expressions within the past few weeks of the opinions of many of the greatest thinkers of the age, that typhoid fever can not be aborted, and in fact, that the internal exhibition of drugs can have no curative effect, warns me that I have essayed enough and that this paper had better be devoted to strengthening the evidence that the claims already made are valid, and avoid as much as possible enlarging the territory which I shall have to defend. I feel that I do not owe the Section any apology for this change, because this is a disease that according to eminent authority "destroys annually the lives of 50,000 of our people, leads to the very brink of the grave more than half a million more, which during the next twelve months will inflict upon us more injury, suffering and death than any foreign foe could possibly do," and which, I believe, is rapidly increasing. A disease whose geographical distribution is limited by no boundary lines, whose germs may live indefinitely in the icebergs of the frozen North, and thrive in the torrid heat of the equator, can not be accorded too much attention by this ASSOCIATION, especially as the medical literature is in such a chaotic state as to be exceedingly confusing to those who place any trust in it. A literature which is not at all creditable to the medical profession as long as its recommendations for treatment form such a medley of contradictions, from "armed expectancy" to the most heroic exhibition of the most dangerous

therapeutic agents, from corrosive sublimate to the coal-tar derivatives, including almost every known poison, and all having most enthusiastic devotees until finally, the materia medica having been taxed to the limit of endurance, a new class of enthusiasts has arisen, and now the bath-tub and sponge and the cold pack have their advocates who can see nothing but dire disaster in the use of any therapeutic agents except cold water. And the most amusing, were it not the most tragical publication that has ever issued from any press, is the Johns Hopkins Hospital Report, Vol. iv, No. 1, on "Typhoid Fever," which I have just received, in which the learned Professor of the Principles and Practice of Medicine of the Johns Hopkins University asserts, and I quote him literally: "Since typhoid fever like a majority of the specific infections runs a course uninfluenced by any known medicines, the duty of the physician is to see that the patient is properly nursed and fed and that dangerous symptoms should they arise are combated by appropriate remedies. In hygienic and dietetic measures his activity is incessant; so far as drugs are concerned his attitude is best expressed in the term 'armed expectancy,' giving no medicine simply because the patient has a fever; nursing and diet are the supports in which we trust, the essentials under all circumstances to which is added the cold bath, when possible, or cold sponging for the antipyretic action and stimulating effect. Medicines are not as a rule indicated. No known drug shortens by a day the course of the fever. No method of specific treatment or of antisepsis of the bowel has yet passed beyond the stage of primary laudation."

During the past year I have written papers under the title "Can Typhoid Fever be Aborted?" for the Mississippi Valley Medical Association, the Mahoning County and the Ohio State Medical Societies, in which I presented evidence that typhoid fever can be and has been aborted, which would have been accepted

as absolutely conclusive in any profession save that which in America's most cultured city failed to recognize the discoverer of ether until he had lain for a



Case No. 67.

generation in an unhonored grave, and his widow had lived long in poverty and, I fear, even in want; and which in the most enlightened capital of the Old

World made the life of the discoverer of vaccination immeasurably burdensome.

These papers show that after having had, during the ten years from 1866 to 1876, about thirty deaths from typhoid fever, with an average duration of illness of those who recovered of about thirty-five days, I abandoned the symptomatic treatment now advocated by some learned professors and began in 1876 with extreme caution to treat typhoid fever under the same general principles which crudely govern my practice to-day. That after having had unusually favorable results for four years, in 1880 in my local society I condemned all known methods of treating typhoid fever and foreshadowed the brilliant results I have since obtained from the principles of treatment then laid down. That in 1882 I declared hemorrhage of the bowels would be unknown if the disease were properly treated, saying I believed that a law sending to State prison a physician having such a result would be wise and beneficent. That in 1890, to emphasize my statement that typhoid fever could be aborted, I offered to compensate any member of my society for every visit made to a patient after the tenth day of treatment. That for several years I had invariably given a favorable prognosis, and that for more than thirteen years I have had no death from typhoid, malarial or any continued fever. With each of these papers I presented up to the date of its reading the histories of the most interesting and characteristic cases, exhibiting the bedside charts of all the cases treated since June 25, 1893, when I first began to keep accurate bedside records. They were all freely discussed by many of the ablest members of both my local and State societies. The charts were verified by the members who had seen the patients and my statements were endorsed.

The criticism of my paper read recently before the Ohio State Medical Society was highly gratifying to me. The discussion was opened by Dr. Collamore in his happiest vein. The general tenor of the remarks

were in favor of giving progressive ideas a warm welcome and a fair trial. There was present but one member from Youngstown—Dr. J. E. Cone—who said: “Being from Dr. Woodbridge’s town and society, I wish to say that we have had several ‘fights’ on this subject and we have been watching his cases for several years to see if he could make his pledges good, but so far we have been unable to discover that he has made any failures or had a death from typhoid fever. And we intend to continue watching his cases in the future, and if he has a death we will report it.” A little speech which read between the lines speaks volumes. Prof. Murphy, however, spoke eloquently in adverse criticism, saying in substance that there could be no curative treatment for typhoid fever and he doubted the correctness of the diagnosis and observation of any physician who asserted he was able to abort the disease. He said I shocked him when I said I allowed my patients to sit up, walk about, and even to eat solid food. I shall not attempt to quote Dr. Murphy’s words or essay the hopeless task of reproducing or even describing his eloquent speech, but as I sat spell-bound listening with admiration to his brilliant oratory, I could not help wishing that he could see the subject as I see it, and were speaking for, instead of against the right; and not long since after having read a paper before a medical organization composed largely of the teachers in one of our boasted centers of learning, the same general expressions of opinion were made, one gentleman saying: “If there is anything in medicine that is well established, it is that the course of the disease (typhoid fever) can not be interrupted.” Another gentleman who, as I judged, from his special learning and ability had been given the closing argument against my theories, criticised these charts very severely, saying: “With four or five possible exceptions there was not a typhoid fever curve among them;” evidently forgetting that they are presented to show the modification of the “curve” by antiseptic treatment; that most

of the patients were examined and the diagnosis verified by physicians quite as cautious as himself, and that if the "curve" had remained unmodified the treatment would have been a failure.

These oracular assertions (they can not be called arguments) should never have been made. We know too little of the action of antiseptics, too little of the bacteriologic world, of the antagonisms existing between these minute denizens to warrant any gentleman, however learned, in placing his individual opinion above the evidence of years of experience, and the testimony of a score of physicians quite as competent as himself to make careful observations and exact diagnoses, especially when among these observers are included several ex-Presidents of our local Society and at least one ex-President of our State Society, or in placing himself as a stumbling block in the pathway of investigation and progress. Had they anything better to offer, their opinions ought to be carefully weighed, but when they oracularly assert that a course of treatment which they have never tried and of which they have no knowledge can do no good, they are simply lending their learning and the weight of their great names to aid in retarding the day when typhoid fever shall cease to be at once the stigma and the despair of medicine.

If you accept the theory that typhoid fever is caused by a germ, you must accept its corollary, that the germ can be destroyed, and if in one receptacle, or the alimentary canal of one patient, then as a legitimate sequence in every one, and if the physician who accepts this theory sees his patient sufficiently early and treats every suspicious case on the first appearance of suspicious symptoms, he will rarely see a typical case of typhoid fever, and never a death from the disease. Now the simple fact that I have had no death from typhoid fever for more than thirteen years is alone strong presumptive evidence that the claims I make are well founded, and when taken in connection with my previous record and with the

statement of the last President of our local Society, when one of my earlier papers was under discussion, that he had no doubt that I had treated more than my full share of typhoid fever, entitle the subject to careful consideration. Since the unaided efforts of one man, however faithfully he may pursue his investigations, must be long indeed in accumulating sufficient data upon which to base a scientific discussion of the subject, and longer in giving such expression to the finished work as to command the attention and the confidence of the great body of a profession peculiarly prone to look upon anything *new* with a great deal of suspicion; I therefore appeal to every member of the AMERICAN MEDICAL ASSOCIATION, and to every physician who treats a case of the disease, to aid me in the accumulation of such data as shall lead to a better knowledge of typhoid fever, and especially of the action of antiseptics in its treatment. For this purpose, and because I have been unable to find a clinical chart so arranged as to make the collection of necessary data practical and easy, I have devised one that will enable the busy practitioner to make his record valuable with the least possible loss of time.

In conclusion, I wish to call attention briefly to the treatment which has already been published, and to say that with wider experience I hope to be able to eliminate some of the ingredients which give the formula such a complex and unscientific appearance. I am still using the formula as already published, viz.:

R Podophyllin	gr. i.
Hydrarg. chlor. mit.	3 i.
Guaiacol carb.	3 vi.
Thymol	gr. v.
Menthol.	gr. v.
Sacch alb.	3 ii.

alternated with the

Eucalyptol	5 x 10 m.
Guaiacol	2 x 5 m.

No pretense is made that this is the *only* preparation which will cure typhoid fever, nor that all or any of its ingredients are necessarily essential, but because thus far it has not failed me,¹ and crude and unscientific as the mixture appears I know of nothing better, and I hope no gentleman will say he has given my treatment a trial and failed, who has not exhibited these identical mixtures, alternated as directed; nor must he interject anything calculated to interfere with their effect. As the mixture is practically harmless it may be exhibited in almost unlimited quantities. I, however, advise beginning with exceedingly small doses and thus avoid early catharsis.

As I stated in a former paper, I am ready to go wherever in the wide world typhoid fever claims a victim, whether it be across the continent or over the ocean, and I challenge the publication of any failure.

¹The accompanying chart, No. 67, shows the need of more exact knowledge in the use of antiseptics, since I twice discontinued the use of formula No. 1, only to find the temperature again going up, and to be forced again to resume it.

